

Fill in this information to identify the case:

FILED
 at 1 O'clock 27 min. P M
MAY 09 2022
 United States Bankruptcy Court
 Columbia, South Carolina

Debtor 1 Zamboli's Corporation
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Carolina

Case number: 95-72248

Form 1340 (12/19)**APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS****1. Claim Information**

For the benefit of the Claimant(s)¹ named below, application is made for the payment of unclaimed funds on deposit with the court. I have no knowledge that any other party may be entitled to these funds, and I am not aware of any dispute regarding these funds.

Note: If there are joint Claimants, complete the fields below for both Claimants.

Amount:	\$679.65
Claimant's Name:	Steven L Jacobs
Claimant's Current Mailing Address, Telephone Number, and Email Address:	1550 Kincaid Rd Marietta GA 30066 (404) 574-0809

2. Applicant Information

Applicant² represents that Claimant is entitled to receive the unclaimed funds because (*check the statements that apply*):

- ☒ Applicant is the Claimant and is the Owner of Record³ entitled to the unclaimed funds appearing on the records of the court.
- ☐ Applicant is the Claimant and is entitled to the unclaimed funds by assignment, purchase, merger, acquisition, succession or by other means.
- ☐ Applicant is Claimant's representative (e.g., attorney or unclaimed funds locator).
- ☐ Applicant is a representative of the deceased Claimant's estate.

3. Supporting Documentation

- ☒ Applicant has read the court's instructions for filing an Application for Unclaimed Funds and is providing the required supporting documentation with this application.

¹ The Claimant is the party entitled to the unclaimed funds.

² The Applicant is the party filing the application. The Applicant and Claimant may be the same.

³ The Owner of Record is the original payee.

4. Notice to United States Attorney

- ☒ Applicant has sent a copy of this application and supporting documentation to the United States Attorney, pursuant to 28 U.S.C. § 2042, at the following address:

Office of the United States Attorney
District of South Carolina
1441 Main St, Suite 500
Columbia SC 29201

5. Applicant Declaration

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: 4-25-22

Signature of Applicant

Steven L Jacobs

Printed Name of Applicant

Address: 1550 Kincaid Rd
Marietta GA 30066

Telephone: (404) 574-0809

Email: GWIZER1550@GMAIL.COM

5. Co-Applicant Declaration (if applicable)

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Date: _____

N/A

Signature of Co-Applicant (if applicable)

N/A

Printed Name of Co-Applicant (if applicable)

Address: _____

Telephone: _____

Email: _____

6. Notarization

STATE OF Georgia

COUNTY OF Cobb

This Application for Unclaimed Funds, dated 4-25-2022 was subscribed and sworn to before me this 25 day of April, 2022 by

who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

(SEAL) Notary Public DENNIS M. URWIN

My commission expires: 2-10-2026

6. Notarization

STATE OF _____

COUNTY OF _____

This Application for Unclaimed Funds, dated _____ was subscribed and sworn to before me this _____ day of _____, 20____ by

who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument. WITNESS my hand and official seal.

(SEAL) Notary Public _____

My commission expires: _____



**UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA**

[illegible]

ORDER GRANTING APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

On 5/3/2022, an application was filed for the Claimant(s),
Steven L Jacobs, for payment of unclaimed funds deposited with the
court, pursuant to 11 U.S.C. § 347(a). The application and supporting documentation establish
that the Claimant(s) is/are entitled to the unclaimed funds; accordingly, it is hereby

ORDERED that, pursuant to 28 U.S.C. § 2042, the sum of \$ 679.65 held in unclaimed funds be made payable to Steven L Jacobs and be disbursed to the payee at the following address:

1550 Kincaid Rd, Marietta GA 30066

The Clerk will disburse these funds not earlier than 14 days after entry of this order.

STEVEN L. JACOBS

1550

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ITEM X-RAYED
BY USMS
W

U.S. Bankruptcy Courthouse
1100 Laurel Street
Columbia SC 29201

U.S. BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

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